

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: MailMail Stop ISSUE FEE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence, including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

42754

7590

08/08/2007

NIELDS & LEMACK  
176 EAST MAIN STREET, SUITE 7  
WESTBORO, MA 01581

## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

11/06/2007 WARDEL3 00000001 10689121

01 FC:1501 1440.00 DP  
02 FC:1504 300.00 DP  
(3 FC:8001 30.00 DP)

|                  |                    |
|------------------|--------------------|
| Kevin S. Lemack  | (Depositor's name) |
|                  | (Signature)        |
| October 31, 2007 | (Date)             |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10/689,121      | 10/20/2003  | William Kopaciewicz  | MCA-617             | 2908             |

TITLE OF INVENTION: MULTI-SIDED IMMERSION FORMATION OF COMPOSITE STRUCTURES AND METHOD

| APPLN. TYPE    | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE   |
|----------------|--------------|---------------|---------------------|----------------------|------------------|------------|
| nonprovisional | NO           | \$1400        | \$300               | \$0                  | \$1700           | 11/08/2007 |

| EXAMINER        | ART UNIT | CLASS-SUBCLASS |
|-----------------|----------|----------------|
| HANDY, DWAYNE K | 1743     | 422-102000     |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Nields &amp; Lemack

2

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Millipore Corporation

Billerica, Massachusetts

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies 10

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

- ☒ A check is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 14-0930 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Date October 31, 2007

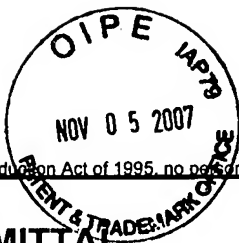
Typed or printed name

Kevin S. Lemack

Registration No. 32,579

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



PTO/SB/21 (10-07)

Approved for use through 10/31/2007. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission 5

|                        |                     |
|------------------------|---------------------|
| Application Number     | 10/689,121          |
| Filing Date            | October 20, 2003    |
| First Named Inventor   | William Kopaciewicz |
| Art Unit               | 1743                |
| Examiner Name          | Handy, Dwayne K.    |
| Attorney Docket Number | MCA-617             |

**ENCLOSURES** (Check all that apply)

- |  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input checked="" type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Reply to Missing Parts/<br>Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts<br>under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a<br>Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br>Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input checked="" type="checkbox"/> After Allowance Communication to TC<br><input type="checkbox"/> Appeal Communication to Board<br>of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC<br>(Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify<br>below):<br>-Issue Fee Transmittal Letter<br>-Part B - Issue Fee Transmittal Form |
|--|--|--|

Remarks

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

|              |                  |          |        |
|--------------|------------------|----------|--------|
| Firm Name    | Niels & Lemack   |          |        |
| Signature    |                  |          |        |
| Printed name | Kevin S. Lemack  |          |        |
| Date         | October 31, 2007 | Reg. No. | 32,579 |

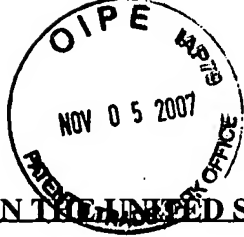
**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

|                       |                 |      |                  |
|-----------------------|-----------------|------|------------------|
| Signature             |                 |      |                  |
| Typed or printed name | Kevin S. Lemack | Date | October 31, 2007 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



**BOX ISSUE FEE**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of

Group Art Unit: 1743

**William Kopaciewicz et al.**

Examiner: Handy, Dwayne K.

Serial No.: 10/689,121

Filed: October 20, 2003

Allowance Date: 8/8/2007

Case No: MCA-617

Confirmation No: 2908

Customer No: 42754

For: **MULTI-SIDED IMMERSION FORMATION OF COMPOSITE STRUCTURES AND METHOD**

Mail Stop: Issue Fee  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:


**LETTER OF TRANSMITTAL**

Please accept the attached Issue Fee Transmittal sheet PTOL-85B and a check in the amount of \$1770.00 in payment of the issue fee, publication fee and the advanced order fee for the above application.


Authorization is given to charge any deficiencies or credit any overpayment to Deposit Account No. 14-0930.

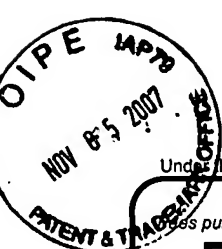
Please notify Applicant's attorney if any problems should arise.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on October 31, 2007

  
Signature: Kevin S. Lemack  
Date: October 31, 2007

Respectfully submitted,

  
Kevin S. Lemack  
Attorney for Applicants  
Registration No. 32,579  
Niels & Lemack  
176 E. Main Street  
Westboro, MA 01581  
TEL: (508) 898-1818



Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number

Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL**  
**For FY 2008**☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 1770.00**Complete if Known**

|                      |                     |
|----------------------|---------------------|
| Application Number   | 10/689,121          |
| Filing Date          | October 20, 2003    |
| First Named Inventor | William Kopaciewicz |
| Examiner Name        | Handy, Dwayne K.    |
| Art Unit             | 1743                |
| Attorney Docket No.  | MCA-617             |

**METHOD OF PAYMENT** (check all that apply)☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_☒ Deposit Account Deposit Account Number: 14-0930 Deposit Account Name: Nields & Lemack

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below☐ Charge fee(s) indicated below, except for the filing fee☒ Charge any additional fee(s) or underpayments of fee(s)  
under 37 CFR 1.16 and 1.17☒ Credit any overpayments**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES |                       | SEARCH FEES |                       | EXAMINATION FEES |                       | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
|                  | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)         | Small Entity Fee (\$) |                |
| Utility          | 310         | 155                   | 510         | 255                   | 210              | 105                   |                |
| Design           | 210         | 105                   | 100         | 50                    | 130              | 65                    |                |
| Plant            | 210         | 105                   | 310         | 155                   | 160              | 80                    |                |
| Reissue          | 310         | 155                   | 510         | 255                   | 620              | 310                   |                |
| Provisional      | 210         | 105                   | 0           | 0                     | 0                | 0                     |                |

**2. EXCESS CLAIM FEES**

| Fee Description                                    | Fee (\$) | Small Entity Fee (\$) |
|--|----------|-----------------------|
| Each claim over 20 (including Reissues)            | 50       | 25                    |
| Each independent claim over 3 (including Reissues) | 210      | 105                   |
| Multiple dependent claims                          | 370      | 185                   |

|                     |                     |                 |                      |                                  |                      |
|---------------------|---------------------|-----------------|----------------------|----------------------------------|----------------------|
| <b>Total Claims</b> | <b>Extra Claims</b> | <b>Fee (\$)</b> | <b>Fee Paid (\$)</b> | <b>Multiple Dependent Claims</b> |                      |
| - 20 or HP =        | x                   | =               |                      | <b>Fee (\$)</b>                  | <b>Fee Paid (\$)</b> |

HP = highest number of total claims paid for, if greater than 20.

|                      |                     |                 |                      |
|----------------------|---------------------|-----------------|----------------------|
| <b>Indep. Claims</b> | <b>Extra Claims</b> | <b>Fee (\$)</b> | <b>Fee Paid (\$)</b> |
| - 3 or HP =          | x                   | =               |                      |

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

|                     |                     |   |                 |                      |
|---------------------|---------------------|---|-----------------|----------------------|
| <b>Total Sheets</b> | <b>Extra Sheets</b> | <b>Number of each additional 50 or fraction thereof</b> | <b>Fee (\$)</b> | <b>Fee Paid (\$)</b> |
| - 100 =             | / 50 =              | (round up to a whole number) x                          | =               |                      |

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Issue Fee, Publication Fee & Advanced Order Fee - 10**Fees Paid (\$)**

\$1770.00

**SUBMITTED BY**

|                   |                    |   |                        |
|-------------------|--------------------|---|------------------------|
| Signature         | <u>[Signature]</u> | Registration No.<br>(Attorney/Agent) 32,579 | Telephone 508-898-1818 |
| Name (Print/Type) | Kevin S. Lemack    |   | Date October 31, 2007  |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.